

River Parkways Grant Program

Application Form

Project Name		Estimated Date of Completion: _____			
		Grant Amount Requested: \$ _____			
		Estimated Total Project Cost: \$ _____ <small>(State Grant and other funds and In-Kind donations)</small>			
APPLICANT/SPONSOR (with mailing address) Check one: Non-Profit <input type="checkbox"/> Local Public Agency <input type="checkbox"/> State Agency <input type="checkbox"/>		County _____			
		Nearest City/Town _____			
		Project Address (or nearest cross street) _____			
		Senate Dist. _____ Assembly Dist. _____ US Congressional Dist. _____			
Applicant's Representative Authorized in Resolution (Signature required at bottom of this page)					
Name: _____		Title: _____			
Phone: _____		Email Address: _____			
Project Manager - Person with day to day responsibility for project (if different from authorized representative)					
Name: _____		Title: _____			
Phone: _____		Email Address: _____			
Brief description of project (Summarize major activities to be funded by this RP Grant)		Latitude	Longitude		
		Coordinates Represent: _____			
		Coordinates Determined Using: _____			
Name of River, Stream or Creek: _____					
Two (2) statutory conditions		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-right: 1px solid black; padding: 5px;"> Recreation <input type="checkbox"/> Habitat <input type="checkbox"/> Flood Management <input type="checkbox"/> Conversion <input type="checkbox"/> Conservation & Interpretive Enhancement <input type="checkbox"/> </td> <td style="width: 50%; padding: 5px;"> Public Access <input type="checkbox"/> Project Type: _____ Miles of Trails to be Created: _____ Acres of Habitat to be Restored: _____ Number of Acres to be Acquired _____ </td> </tr> </table>		Recreation <input type="checkbox"/> Habitat <input type="checkbox"/> Flood Management <input type="checkbox"/> Conversion <input type="checkbox"/> Conservation & Interpretive Enhancement <input type="checkbox"/>	Public Access <input type="checkbox"/> Project Type: _____ Miles of Trails to be Created: _____ Acres of Habitat to be Restored: _____ Number of Acres to be Acquired _____
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I certify that the information contained in this project application, including required attachments, is complete and accurate.					
Signed: _____		_____ <div style="text-align: center; color: red;">Applicant's Authorized Representative as shown in Resolution</div> <div style="text-align: right;">Date</div>			
Print Name: _____		Print Title: _____			
		Designee? Y N If yes, attach letter of designation from authorized representative.			